2-18-05

TR) 3626



PATENT
Attorney Docket No.: GEH-01-062

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

McMullen et al.

Group No.: 3626

Serial No.:

09/658,370

Filed:

September 8, 2000

Examiner: Kalinowski, Alexander

For:

TOTAL TRANSPORTATION

MANAGEMENT SYSTEM

Mail Stop: Amendment Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

#### **TRANSMITTAL**

1. Transmitted herewith is:

Amendment Transmittal which includes Certificate of Express Mail (3 pgs.) NO FEE Response to Notice of Non-Compliant Amendment (38 pgs.)
Return Postcard

#### **STATUS**

2. Applicant

claims small entity status. is other than a small entity.

## CERTIFICATE OF MAILING BY EXPRESS MAIL TO THE COMMISSIONER FOR PATENTS

Express Mail No. EV734459877US

**Date: August 17, 2005** 

I hereby certify that the documents listed above are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. §1.10 on the date indicated above in an envelope addressed to Mail Stop: Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

William J. Zychlewicz, Reg. No. 51,366

# **EXTENSION OF TERM**

| 3.  | 3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. apply. |                                |  |   |  |  |  |  |  |  |  |  |
|---|---|--------------------------------|--|---|--|--|--|--|--|--|--|--|
|   | (complete (a) or (b), as applicable)  |                                |  |   |  |  |  |  |  |  |  |  |
|   | (a)   |                                | Applicant petitions for an extension of time under 37 C.F.R. 1.136 (Fees: 37 C.F.R. 1.17(a)-(d) for the total number of months checked below:) |   |  |  |  |  |  |  |  |  |
|   |   | Extension for response within: | Other than small entity Fee  | Small entity Fee (if applicable)                |  |  |  |  |  |  |  |  |
|   |   | first month                    | \$ 120.00  | \$ 60.00<br>\$ 225.00<br>\$ 510.00<br>\$ 795.00 |  |  |  |  |  |  |  |  |
|   |   | second month                   | \$ 450.00  |   |  |  |  |  |  |  |  |  |
|   |   | third month                    | \$ 1,020.00  |   |  |  |  |  |  |  |  |  |
|   |   | fourth month                   | \$1,590.00   |   |  |  |  |  |  |  |  |  |
|   |   | fifth month                    | \$2,160.00   | \$1,080.00                                      |  |  |  |  |  |  |  |  |
|   |   |                                | Fee:   | \$  |  |  |  |  |  |  |  |  |
| If an additional extension of time is required, please consider this a petition therefor.   |   |                                |  |   |  |  |  |  |  |  |  |  |
| (Check and complete the next item, if applicable)   |   |                                |  |   |  |  |  |  |  |  |  |  |
| An extension of months has already been secured. The fee paid therefor \$ is deducted from the total fee due for the total months of extension now requested. |   |                                |  |   |  |  |  |  |  |  |  |  |
|   | Extension fee due with this request \$  |                                |  |   |  |  |  |  |  |  |  |  |
|   | OR  |                                |  |   |  |  |  |  |  |  |  |  |
|   | d. However, this ossibility that petition for extension                                       |                                |  |   |  |  |  |  |  |  |  |  |
|   |   |                                |  |   |  |  |  |  |  |  |  |  |

# FEE FOR CLAIMS

|        | (Col. 1)  |                                | (Col. 2)  |                                       | (Col. 3)         | SMALL ENTITY  | hown below:<br>OTHER THAN<br>SMALL ENTITY |                         |  |
|--------|---|--------------------------------|-----------|---------------------------------------|------------------|---|---|-------------------------|--|
|        | REMA<br>AF  | AIMS<br>AINING<br>TER<br>DMENT |           | HIGHEST NO.<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA | ADDITIONAL.<br>RATE FEE   | OR  | ADDITIONAL<br>RATE FEE  |  |
| TOTAL  |   |                                | MINUS     |                                       | =                | x \$25.00 = \$  |   | x \$50.00 = \$          |  |
| INDEP. |   |                                | MINUS     |                                       | =                | x \$100.00 = \$   |   | x \$200.00 = \$         |  |
|        | FIRS  | T PRESEN                       | TATION OF | MULTIPLE DEP. (                       | CLAIM            | +\$180.00 = \$  |   | + \$360.00 = \$         |  |
|        |   |                                |           | <u>-</u>                              |                  | TOTAL ADDITIONAL FEE \$   | OR  | TOTAL ADDITIONAL FEE \$ |  |
|        | (a)   | $\boxtimes$                    | No add    | itional fee for                       | r Claims is      | required  |   |                         |  |
|        |   |                                |           |                                       | OR               |   |   |                         |  |
|        | (b)   |                                | Total ac  | lditional fee                         | for claims       | required \$   |   |                         |  |
|        |   |                                |           | FEE 1                                 | PAYMEN           | Т   |   |                         |  |
| 5.     |   | Attach                         | ed is a c | heck in the si                        | um of \$         |   |   |                         |  |
|        |   |                                |           | t Account No<br>this transmit         |                  | the sum of \$  ned.   |   |                         |  |
|        |   |                                |           | FEE D                                 | EFICIEN          | CY  |   |                         |  |
| 6.     | 6. If any additional extension and/or fee is required, charge Deposit Accour 01-2384. |                                |           |                                       |                  |   |   |                         |  |
|        |   |                                |           | A                                     | ND/OR            |   |   |                         |  |
|        | $\boxtimes$   | If any 2384.                   | addition  | al fee for clai                       | ms is requi      | ired, charge Deposi   | t Acc                                     | ount No. 01-            |  |
| 7.     |   | Other:                         |           |                                       |                  |   |   |                         |  |
|        |   |                                |           |                                       | Reg<br>AR<br>One | liam J. Zychlewicz<br>J. No. 51,366<br>MSTRONG TEASI<br>Metropolitan Squa |   |                         |  |

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### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

licant: McMullen et al.

Art Unit: 3626

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### RESPONSE TO NOTICE OF NON-COMPLIANT AMENDMENT

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

In response to the Office Action dated June 3, 2005, please amend the aboveidentified patent application as follows: